

Application to Discharge PLUS Loan Student's Ability To Benefit From Training

Enclosed is an application to have your student loan discharged. Parents who borrowed under the Federal PLUS loan program, and who received the proceeds of the loan on or after January 1, 1986, may be eligible to have their loans discharged if the student for whom the PLUS loan was made attended a school that falsely certified the student's eligibility to receive the loan based on the student's ability to benefit from the school's training.

If your loan is discharged, you will not owe any more payments on the loan, and you will get a refund of payments you made in the past. Also, if your loan is discharged, we will tell credit reporting agencies that the loan was discharged, and any adverse credit history resulting from nonpayment of your discharged loan will be deleted. In addition, your discharged loan will not prevent you from applying for federal financial aid.

If you believe you may qualify, please fill out the enclosed application. **It is important that you provide a complete answer to each of the questions on the form to the best of your knowledge, based on the information available to you.** If you do not know or cannot get the information to answer some of the questions on the form, you are not necessarily precluded from having your loan discharged.

After completing and signing the enclosed application, return it and any supporting documentation to:

United States Department of Education
Debt Collection Service
Loan Discharge Applications
P.O. Box 422037
San Francisco, CA 94142

While we are deciding whether to discharge your loan, your loan will be in "forbearance." Forbearance means that you do not have to make payments. Interest will still be added to your balance. If your loan is not discharged, you will have to begin making payments. We will send you a written decision on your application as soon as possible.

The full criteria by which borrowers may qualify for such a discharge are set forth in Department of Education regulations 34 C.F.R. § 682.402(e) (1994).

Last Name	First Name	Middle Initial	SSN
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Please use this page if you need additional space to answer questions on the attached application. Indicate the number of the question(s) you are answering, and be sure your name and social security number is on any other sheet or document you attach.

Question #

PRIVACY ACT NOTICE

The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authority for collecting the requested information from and about you is Section 428(b)(2)(A) of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(a)). You are advised that completing an application for Federal Family Education Loan (FFEL) Program loan discharge is voluntary, but that the requested information is necessary for the Department of Education to determine whether you qualify for loan discharge.

The principal purpose of this information is to verify your identity to determine whether you are eligible for discharge of your FFEL Program loan. You must provide all of the requested information that is available to you in order to have your application processed.

The routine uses of this information include its disclosure to federal, state, or local agencies, to provide parties such as relatives, present and former employers, business and personal associates, to guaranty agencies, to credit bureau organizations, to educational and financial institutions, and to agency contractors in order to verify your identity, to determine your eligibility for benefits, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to investigate possible fraud and to verify compliance with Program regulations, or to locate you if you become delinquent in your loan(s) payments or you default.

Section 7(b) of the Privacy Act of 1974 (5 U.S.C. 552a note) requires that when any federal, state, or local government agency requests that you disclose your Social Security Number (SSN), you must also be advised whether that disclosure is mandatory or voluntary, by what statutory or other authority your SSN is solicited, and what uses will be made of it.

Section 7(a)(2) of the Privacy Act provides that an agency may continue to require disclosure of your SSN as a condition to grant you a right, benefit, or privilege provided by law in cases in which the agency required this disclosure under statute or regulation prior to January 1, 1975, in order to verify the identity of an individual.

Disclosure of your SSN is required to participate in the FFEL Program loan discharge program. The United States Department of Education has, for several years, consistently required the disclosure of the SSN on application forms and other necessary FFEL Program loan documents adopted pursuant to published regulations. Authority for releasing this information is found in FFEL Program loan regulations, particularly 34 CFR 682.201(a)(2) and (b)(2) and 682.504.

Your SSN will be used to verify your identity, and as an account number (identifier) throughout the life of your loan(s) in order to record necessary data accurately. As an identifier, the SSN is used in such program activities as determining your eligibility, certifying your school attendance and student status, determining your eligibility for deferment of repayments, determine your eligibility for disability or death claims, and for tracing and collecting from you in case you become delinquent in your loan payments or you default.

Application to Discharge PLUS Loan -- Student's Ability To Benefit From Training

Before Answering Questions, Read the Complete Application Including the Certification
If you need additional space to answer any question, please attach a separate sheet to this form.
Please type or print your answers. For all dates, provide month, day, and year (MM/DD/YY).

WARNING: If you knowingly or willfully give false, fictitious, or fraudulent information on this form, you may be fined up to \$10,000, imprisoned, or both.

Personal Information

1. Last Name: First Name: M.I. 2. Soc. Sec. No: 3. Telephone Numbers (Include area codes):
Home: Work:
4. Your Street Address: City: State: Zip code: Apt. No.
5. Student's Full Name and Soc. Sec. No:
6. Your relationship to Student: Father ☐ Mother ☐ Guardian ☐ Other ☐ (Specify Other)

Enrollment/Attendance History

7. Name of School: 9. School OPE-ID Number:
(Skip if you do not know the school's OPE-ID No)
8. School's Street Address: City: State: Zip code: Suite No.
10. Attendance Dates (From/To): 11. When you applied for your PLUS loan, when did you expect the Student to complete his/her program of study?
12. Did Student have a high school diploma or GED at the time he/she enrolled in the School? ☐ Yes ☐ No
13. Did Student a GED before completing his/her program of study at the School? ☐ Yes ☐ No If Yes, give date:
14. Before the School admitted Student, did it give him/her any kind of entrance examination to test his/her ability to benefit from the program of study in which he/she enrolled? ☐ Yes ☐ No ☐ Don't Know If No or Don't Know, go to question 15.
14a. Give the date of the test:
14b. Indicate the name of the test if you know it:
14c. Indicate Student's score on the test if you know it:
14d. Was there anything not proper about the way the test was given or scored? ☐ Yes ☐ No If yes, explain on separate sheet.
It is very important to explain your answer fully. Please provide the name, telephone number and address of anyone who can support your statement.
15. Did Student complete a developmental or remedial education program at the School? ☐ Yes ☐ No ☐ Don't Know
If yes, describe the program.
16. Did the Student complete his/her program of study at the School? ☐ Yes ☐ No If Yes, give the date:
17. If the Student completed the course, did he/she look for a job in the occupation for which the School trained him/her?
☐ Yes ☐ No If Yes, describe efforts to find a job in that occupation. (Use additional sheet if necessary.)
18. Did Student get a job in that occupation after leaving the School? ☐ Yes ☐ No
18a. Did Student get any more education or training in that occupation before getting this job. ☐ Yes ☐ No
If yes, explain where and when Student got the training.
19. When Student enrolled in the School, did he/she have a physical or mental condition, or a criminal record, that prevented him/her from meeting the legal requirements to get a job, or a license to practice in the occupation for which the program of study was intended to prepare him/her, or which should have prevented him/her from enrolling in that program of study? ☐ Yes ☐ No If yes, describe as fully a possible the legal requirement that Student could not meet, and the reason he/she could not meet the requirement.
20. Was Student's age a factor that prevented him/her from meeting those legal requirements? ☐ Yes ☐ No If Yes, explain.

Federal PLUS Loan History

In your answers to questions 21 through 23, explain in detail on an additional piece of paper the institution(s) or person(s) involved, amount(s), and date(s).

21. Did you or the Student make a claim for, or receive, reimbursement for tuition or other charges, based on the School's closure, from any third party, such as a holder of a performance bond or a tuition recovery program? ☐ Yes ☐ No ☐ Don't Know. If yes, give name of third party, amount(s) and date(s).
22. Did you or the Student ever receive a refund from the School? ☐ Yes ☐ No ☐ Don't Know. If Yes, give amount(s) and date(s).
23. Did your bank or other lender ever receive a refund on behalf of you or the Student? ☐ Yes ☐ No ☐ Don't Know. If Yes, give source, amount, and date.
24. I have attached an additional sheet with my answers. ☐ Yes ☐ No If Yes, I have attached _____ additional sheet(s).

25. Please provide information about the Federal PLUS loan(s) you are asking to be discharged.
Use a separate line for each loan.

Amount of Loan	Approximate Date Loan Received	Bank or Other Lending Institution (If Known)	Guaranty Agency (If Known)

If you received other loans that you are asking to be discharged, please provide similar information on a separate sheet.

CERTIFICATION

I am applying for loan discharge of my Federal PLUS loan(s) because the school identified in my Application ("School") falsely certified the eligibility of the student identified in my Application ("Student") to attend the School based on the Student's ability to benefit from the School's training as stated in this Application.

I understand that the United States Department of Education ("the Department") may discharge the Federal PLUS loan(s) that I obtained for the Student to attend the School based on the information which I provided on this Application. I further understand that if my loan(s) are discharged based on any false, fictitious or fraudulent statements made on this Application, I may be subject to civil and criminal penalties under applicable Federal law. I understand that the Department will revoke the discharge if I fail to provide testimony, affidavit or documentation reasonably available to me, or if I provide testimony, affidavit, or documentation that does not support the representations I made on this Application.

I hereby assign and transfer to the Department any and all claims I have or may have against the School, and/or any owners, affiliates or assigns of the School, and against any party that may pay claims because of the actions of the School, up to the amounts discharged and refunded by the Department on my loans.

I further agree that if the Department discharges my loan obligation based on statements made on this Application, I will cooperate with the Department or its designee in any judicial or administrative proceedings to recover from third parties any amounts discharged or refunded by the Department. I will cooperate with the Department by providing testimony, affidavit, and/or documentation, regarding any representation that I made on this Application.

I certify under penalty of perjury that the statements I made to answer these questions on this Application, as well as any statements I made in separate pages attached to such Application, are true, accurate and complete to the best of my knowledge, information and belief. My signature also certifies that I have read, understand, and agree to all the conditions of this application/certification for loan discharge.

Signature: _____

Date: _____

Name printed: _____

Soc. Sec. No: _____

To help us make a decision in your case, when you return this form, please include the names, addresses, and telephone numbers of any persons who can support the statements in your application. You may include *copies* of documents you believe would assist us. Examples of such documents include:

1. The entrance test or GED.
2. The Student's transcript from the School.
3. Diploma, Enrollment Agreement (or other documents showing the Student's enrollment and graduation dates).
4. Loan documents such as loan application and promissory note, and documents relating to the Student's loan.
5. Correspondence with the School relating to any entrance examination the School gave Student to test his/her ability to benefit from the program of study in which he/she enrolled.